

EXHIBIT K

COMPLAINT - FOLLOW UP INFORMATIONAL FD 313 081A (Rev. 4-59)-31										PAGE OF 1 PAGE	
Investigate Suspicious Device				Pct 019		OCCB No.		Complaint No. 6836		Date of This Report 6/27/2006	
Date of Orig. Report 6/25/2006		Date Assigned 6/25/2006		Case No. 1273		Unit reporting 019PD8		Follow-Up No.			
Complainant's Name - Last, First, M.I. Starbeck's						Victim's Name - If Different					
Last Name, First, M.I.						Address, include City, State, Zip					
Home Telephone		Business Telephone		Position / Relationship		Sex		Race		Date of Birth	
Total No. of Perpetrators		Wanted		Arrested		Weapon Used <input type="checkbox"/> Possessed <input type="checkbox"/>		Describe Weapon (If firearm, give color, make, caliber, type, model, etc.)			
<input type="checkbox"/> Wanted <input type="checkbox"/> Arrested		Last Name, First, M.I.		Address, include City, State, Zip		Apt. No.		Res. Pct.			
Sex		Race		Date of Birth		Age		Height		Weight	
<input type="checkbox"/> Eyeglasses <input type="checkbox"/> Sunglasses		Clothing Description, Scars, Marks, M.O., Etc. (Continue in "Details")		Eye Color		Hair Color		Hair Length		Facial Hair	
Nickname, First Name, Alias		MIDSD No.		Wanted <input type="checkbox"/> Arrested <input type="checkbox"/>		Last Name, First, M.I.		Address, include City, State, Zip		Apt. No.	
Sex		Race		Date of Birth		Age		Height		Weight	
<input type="checkbox"/> Eyeglasses <input type="checkbox"/> Sunglasses		Clothing Description, Scars, Marks, M.O., Etc. (Continue in "Details")		Eye Color		Hair Color		Hair Length		Facial Hair	
Nickname, First Name, Alias		MIDSD No.		Wanted <input type="checkbox"/> Arrested <input type="checkbox"/>		Last Name, First, M.I.		Address, include City, State, Zip		Apt. No.	
Sex		Race		Date of Birth		Age		Height		Weight	
<input type="checkbox"/> Eyeglasses <input type="checkbox"/> Sunglasses		Clothing Description, Scars, Marks, M.O., Etc. (Continue in "Details")		Eye Color		Hair Color		Hair Length		Facial Hair	
Nickname, First Name, Alias		MIDSD No.		Wanted <input type="checkbox"/> Arrested <input type="checkbox"/>		Last Name, First, M.I.		Address, include City, State, Zip		Apt. No.	
Sex		Race		Date of Birth		Age		Height		Weight	
<input type="checkbox"/> Eyeglasses <input type="checkbox"/> Sunglasses		Clothing Description, Scars, Marks, M.O., Etc. (Continue in "Details")		Eye Color		Hair Color		Hair Length		Facial Hair	
Nickname, First Name, Alias		MIDSD No.		Wanted <input type="checkbox"/> Arrested <input type="checkbox"/>		Last Name, First, M.I.		Address, include City, State, Zip		Apt. No.	
Sex		Race		Date of Birth		Age		Height		Weight	
<input type="checkbox"/> Eyeglasses <input type="checkbox"/> Sunglasses		Clothing Description, Scars, Marks, M.O., Etc. (Continue in "Details")		Eye Color		Hair Color		Hair Length		Facial Hair	
Nickname, First Name, Alias		MIDSD No.		Wanted <input type="checkbox"/> Arrested <input type="checkbox"/>		Last Name, First, M.I.		Address, include City, State, Zip		Apt. No.	
Sex		Race		Date of Birth		Age		Height		Weight	
<input type="checkbox"/> Eyeglasses <input type="checkbox"/> Sunglasses		Clothing Description, Scars, Marks, M.O., Etc. (Continue in "Details")		Eye Color		Hair Color		Hair Length		Facial Hair	
Nickname, First Name, Alias		MIDSD No.		Wanted <input type="checkbox"/> Arrested <input type="checkbox"/>		Last Name, First, M.I.		Address, include City, State, Zip		Apt. No.	
Sex		Race		Date of Birth		Age		Height		Weight	
<input type="checkbox"/> Eyeglasses <input type="checkbox"/> Sunglasses		Clothing Description, Scars, Marks, M.O., Etc. (Continue in "Details")		Eye Color		Hair Color		Hair Length		Facial Hair	
Nickname, First Name, Alias		MIDSD No.		Wanted <input type="checkbox"/> Arrested <input type="checkbox"/>		Last Name, First, M.I.		Address, include City, State, Zip		Apt. No.	
Sex		Race		Date of Birth		Age		Height		Weight	
<input type="checkbox"/> Eyeglasses <input type="checkbox"/> Sunglasses		Clothing Description, Scars, Marks, M.O., Etc. (Continue in "Details")		Eye Color		Hair Color		Hair Length		Facial Hair	
Nickname, First Name, Alias		MIDSD No.		Wanted <input type="checkbox"/> Arrested <input type="checkbox"/>		Last Name, First, M.I.		Address, include City, State, Zip		Apt. No.	
Sex		Race		Date of Birth		Age		Height		Weight	
<input type="checkbox"/> Eyeglasses <input type="checkbox"/> Sunglasses		Clothing Description, Scars, Marks, M.O., Etc. (Continue in "Details")		Eye Color		Hair Color		Hair Length		Facial Hair	
Nickname, First Name, Alias		MIDSD No.		Wanted <input type="checkbox"/> Arrested <input type="checkbox"/>		Last Name, First, M.I.		Address, include City, State, Zip		Apt. No.	
Sex		Race		Date of Birth		Age		Height		Weight	
<input type="checkbox"/> Eyeglasses <input type="checkbox"/> Sunglasses		Clothing Description, Scars, Marks, M.O., Etc. (Continue in "Details")		Eye Color		Hair Color		Hair Length		Facial Hair	
Nickname, First Name, Alias		MIDSD No.		Wanted <input type="checkbox"/> Arrested <input type="checkbox"/>		Last Name, First, M.I.		Address, include City, State, Zip		Apt. No.	
Sex		Race		Date of Birth		Age		Height		Weight	
<input type="checkbox"/> Eyeglasses <input type="checkbox"/> Sunglasses		Clothing Description, Scars, Marks, M.O., Etc. (Continue in "Details")		Eye Color		Hair Color		Hair Length		Facial Hair	
Nickname, First Name, Alias		MIDSD No.		Wanted <input type="checkbox"/> Arrested <input type="checkbox"/>		Last Name, First, M.I.		Address, include City, State, Zip		Apt. No.	
Sex		Race		Date of Birth		Age		Height		Weight	
<input type="checkbox"/> Eyeglasses <input type="checkbox"/> Sunglasses		Clothing Description, Scars, Marks, M.O., Etc. (Continue in "Details")		Eye Color		Hair Color		Hair Length		Facial Hair	
Nickname, First Name, Alias		MIDSD No.		Wanted <input type="checkbox"/> Arrested <input type="checkbox"/>		Last Name, First, M.I.		Address, include City, State, Zip		Apt. No.	
Sex		Race		Date of Birth		Age		Height		Weight	
<input type="checkbox"/> Eyeglasses <input type="checkbox"/> Sunglasses		Clothing Description, Scars, Marks, M.O., Etc. (Continue in "Details")		Eye Color		Hair Color		Hair Length		Facial Hair	
Nickname, First Name, Alias		MIDSD No.		Wanted <input type="checkbox"/> Arrested <input type="checkbox"/>		Last Name, First, M.I.		Address, include City, State, Zip		Apt. No.	
Sex		Race		Date of Birth		Age		Height		Weight	
<input type="checkbox"/> Eyeglasses <input type="checkbox"/> Sunglasses		Clothing Description, Scars, Marks, M.O., Etc. (Continue in "Details")		Eye Color		Hair Color		Hair Length		Facial Hair	
Nickname, First Name, Alias		MIDSD No.		Wanted <input type="checkbox"/> Arrested <input type="checkbox"/>		Last					